

CHILD'S NAME:	CASE NUMBER:
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## 3. Petitioner on information and belief further alleges the following:

a. The child named below comes within the jurisdiction of the juvenile court under the following subdivisions of section 300 of the Welfare and Institutions Code <i>(check applicable boxes. See attachments for concise statements of facts)</i> : <input type="checkbox"/> (a) <input type="checkbox"/> (b) <input type="checkbox"/> (c) <input type="checkbox"/> (d) <input type="checkbox"/> (e) <input type="checkbox"/> (f) <input type="checkbox"/> (g) <input type="checkbox"/> (h) <input type="checkbox"/> (i) <input type="checkbox"/> (j)				
b. Child's name:		c. Age:	d. Date of birth:	e. Sex:
<input type="checkbox"/> Information is the same as that given for the child in item 1. <i>(If not the same, provide different information below.)</i>				
f. Mother's name: <input type="checkbox"/> unknown Address: <input type="checkbox"/> unknown		g. Father's name: <input type="checkbox"/> unknown Address: <input type="checkbox"/> unknown <input type="checkbox"/> presumed <input type="checkbox"/> alleged		
h. Other <i>(state name, address, and relationship to child)</i> :  <input type="checkbox"/> No known parent or guardian resides within this state. This adult relative lives in this county or is closest to this court.		i. Other <i>(state name, address, and relationship to child)</i> :  <input type="checkbox"/> No known parent or guardian resides within this state. This adult relative lives in this county or is closest to this court.		
j. Prior to intervention, child resided with <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other <i>(state name, address, and relationship to child)</i> :		k. Child is <input type="checkbox"/> not detained <input type="checkbox"/> detained Date and time of detention: Current place of detention <i>(address)</i> :  <input type="checkbox"/> Relative <input type="checkbox"/> Shelter/foster care <input type="checkbox"/> Other		
l. <input type="checkbox"/> Child may be a member of, or eligible for, membership in a federally recognized Indian tribe.				
m. <input type="checkbox"/> Child may be of Indian ancestry.				

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